

FILE NOW: FILING FEE IS \$61.25

FILED

May 15 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000002388 (4)

1. Corporation Name

TAMPA BAY FAMILY BUSINESS FORUM, INC.



Principal Place of Business

Mailing Address

101 STARCREST DR.  
CLEARWATER FL 34625

101 STARCREST DR.  
CLEARWATER FL 34625-3225

3. Date Incorporated or Qualified  
05/03/1996

3a. Date of Last Report  
N/A

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

59-3382357

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POWERS, JILL F  
877 EXECUTIVE CENTER DR.  
SUITE 303  
ST. PETERSBURG FL 33702

81 Name William Lane Jr./Holland & Knight

82 Street Address (P.O. Box Number is Not Acceptable)  
400 N Ashley Drive Suite 2300

83

84 City Tampa

FL

85 Zip Code 33602

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed and printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	C/D	<input type="checkbox"/> DELETE
NAME	Tim Bouchard	
STREET ADDRESS	101 Starcrest Drive	
CITY-ST-ZIP	Clearwater FL 34625	
TITLE	VC/D	<input type="checkbox"/> DELETE
NAME	John Dufresne	
STREET ADDRESS	10014 N Dale Mabry Ste 101	
CITY-ST-ZIP	Tampa FL 33618-4426	
TITLE	S/T/D	<input type="checkbox"/> DELETE
NAME	Mike Bollenback	
STREET ADDRESS	1006 Pinellas Street	
CITY-ST-ZIP	Clearwater FL 34616	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Kenneth Jewell	
STREET ADDRESS	101 Starcrest Drive	
CITY-ST-ZIP	Clearwater FL 34625	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Kimberly H. Sauer	
STREET ADDRESS	324 Monroe	
CITY-ST-ZIP	Dunedin FL 34697-0087	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Kenneth Hamilton	
STREET ADDRESS	10 Bay Esplanade	
CITY-ST-ZIP	Clearwater Beach FL 34630	

11 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	William Lane Jr.	
13 STREET ADDRESS	400 N Ashley Drive	
14 CITY-ST-ZIP	Tampa FL 33601-1288	
21 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	David Kitenplon	
23 STREET ADDRESS	13041 Automobile Blvd	
24 CITY-ST-ZIP	Clearwater FL 34622	
31 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Scott Spencer	
33 STREET ADDRESS	600 Cleveland St Ste 100	
34 CITY-ST-ZIP	Clearwater FL 31615-4157	
41 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	Carl Evans	
43 STREET ADDRESS	4801 Ulmerton Road	
44 CITY-ST-ZIP	Clearwater FL 34622	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)